

CITY OF PARMA

BUILDING DEPARTMENT 6611 RIDGE ROAD PARMA, OHIO 44129

NOTIFICATION OF FORECLOSURE FILING

DA	TE:				
1.	Address of Property:				Ward
		Single Family			
		Commercial	Other		
2.	Name of Current Property Owner:				
	Address:				
	City:		State: _		Zip:
	Phone:		Soc. Se	ec. No. or E.I.N.:	
3.	Name of Party Filing Complaint for Foreclosure:				
	Address:				
	City:		State: _		Zip:
	Phone:		Contac	t Person:	
	Are you filing on behalf of a taxing authority (exempt from fee) Yes No				
4.	Name of Party Responsible for Maintenance when Property is Vacant:				
	Address:				
	City:		State:		Zip:
	Phone:		Contac	t Person:	
5.	5. Fees: In accordance with Section 1725.04 of the Codified Ordinances of the City of Parma, a fee of \$100.00 for a residential property (one- or two-family structure) and \$300.00 for a commercial structure (all structures other than one or two-family structures). Make check payable to the City of Parma.				
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Fo	r Office Use Only:				
Da	ite Paid:	Check No	o.:	Receipt No.	: